

This course is jointly sponsored by the Indiana State Department of Health and the Indiana University School of Medicine Department of Public Health, the Mid-America Public Health Training Center and the Centers for Disease Control and Prevention.

Course Description

This on-site course is designed to provide updates on schedules, contraindications, standard immunization practices, vaccine-preventable diseases, and vaccine management and safety.

Course Objectives

- At the conclusion of the course participants will be able to:**
- Describe the concept of immunity.
 - List two characteristics of live attenuated vaccines.
 - List two characteristics of inactivated vaccines.
 - Identify valid and invalid contraindications to vaccinations.
- For each vaccine-preventable disease (diphtheria, tetanus, pertussis, *haemophilus influenzae* type b, influenza, measles, mumps, rubella, varicella, pneumococcal, polio, hepatitis B, and hepatitis A:
- Describe the disease and the causative agent
 - List the groups at highest risk
 - Identify those for whom routine immunization is recommended
 - State the characteristics, schedule, contraindications, and adverse reactions for each vaccine used to prevent the disease.

Faculty:

National Immunization Program Staff
Centers for Disease Control and Prevention



**Epidemiology and Prevention of
Vaccine-Preventable Diseases**

Tuesday, September 9, 2003
Wednesday, September 10, 2003
8:00 a.m. to 5:00 p.m.
7:30 am. Registration

Course Content:

- Principles of Vaccination
- General Recommendations on Immunization
- Specific disease and vaccine information including:
 - Diphtheria**
 - Tetanus**
 - Pertussis**
 - Haemophilus influenzae* type b (HIB)**
 - Measles, mumps, rubella**
 - Varicella**
 - Pneumococcal disease**
 - Polio & polio eradication**
 - Hepatitis A & Hepatitis B**
- Current Issues
- Vaccine safety

Required Text:

Required for this course is the textbook, *Epidemiology and Prevention of Vaccine-Preventable Diseases*, 7th Edition, January 2002, which must be purchased prior to course attendance. **The textbook will not be available on-site at the conference.**

The textbook may be purchased from the Public Health Foundation for \$25. Telephone orders call (877) 252-1200; order on the web at <http://www.phf.org/> (click on “bookstore” then “immunization” and follow the prompts).

Council on Linkages
Public Health Core Competencies addressed:

- Identify relevant and appropriate data and information sources for vaccine-preventable diseases.
- Obtain and interpret information regarding risks and benefits to the community related to specific vaccines.
- Knowledge of public health laws and regulations related to vaccine programs.
- Prepare and implement emergency response plans for vaccine-preventable diseases.
- Advocate for public health immunization programs.
- Describe how cultural, social and behavioral factors influence vaccine acceptance by various populations.
- Evaluate the integrity and comparability of data and identify gaps in data sources related to vaccine preventable-diseases and vaccines.
- Make relevant inferences from quantitative and qualitative data regarding vaccine effectiveness and safety.

Further Seminar Information

Susan Meece-Hinh
Indiana University School of Medicine, Department of Public Health
Regenstrief Health Center RG 4100
1050 Wishard Blvd
Indianapolis, IN 46202-2872
Tel: (317) 274-3178 Fax: (317) 274-3443
Email: smeecehi@iupui.edu

Continuing Education Credit
Continuing education credit will be offered for a variety of professions, based on 15 hours of instruction. No partial credit will be given.

Location Information
The workshop will be held at Adam’s Mark Hotel & Suites—Downtown Indianapolis, 120 W. Market Street, Indianapolis, IN 46204.

A block of rooms will be held until August 9, 2003 at the government rate of \$79.00/night. For reservations, please call 1-800-444-2326 or the hotel direct number at 317-972-0600. For further information contact the website: www.adamsmark.com.



Epidemiology and Prevention of
Vaccine-Preventable Diseases

Title: ☐ M.D. ☐ R.N.
☐ Public Health Nurse
☐ Other (please specify) _____

Last Name (please print) First Name M.I.

Organization

Address

City County State Zip

Daytime Phone Fax Number

E-Mail Address

Cost/Method of Payment:
Registration Fee: \$75.00

Amount Enclosed \$ _____

- ☐ Check enclosed (make payable to IUSM Dept. of Public Health)
- ☐ Using a county voucher and/or P.O. #, payment will be mailed prior to conference.

Send registration and payment to:

IU Department of Public Health
Attn: Susan Meece-Hinh
1050 Wishard Blvd. RG 4100, Indianapolis, IN
46202-2872

Indiana University Dept. of Public Health
Attn: Susan Meece-Hinh
1050 Wishard Blvd, RG 4100
Indianapolis, IN 46202



Indiana University School of Medicine
Department of Public Health
Indiana State Department of Health
Mid-America Public Health Training Center

EPIDEMIOLOGY AND PREVENTION OF
VACCINE-PREVENTABLE DISEASES

PRESENTED BY:
THE CENTERS FOR DISEASE CONTROL
AND PREVENTION



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Indianapolis, IN 46204